PLACE OF BIRTH	ARIZONA STATE BO	pard of Health
1, County of	BUREAU OF VITAL STATISTICS	
District of	ORIGINAL CERTIFICATE OF BIRT	<i>Ft X</i> 1
Town of	ONIGINAL VEILTHEAT	Local Registrar No. 2/
or //	•	
City of Hay al	No	StWard
City of	If birth occurred in a hospital or distriction are	
2. Full name of child	har tulches on	supplemental report, as direct
	I Will, triblet of others or means	Date of 0 + 9 /22
ONLY in event of	No., in order of birth	birth(Nonth, day, yes
7/1	14.	MOTHER O
8. FATHER	Full maiden Se	rbude Telerson
Full name archive Hall	Ches / Sandon name	
	15. Residence	Handen ans
9. Residence (Usual place of abode)		f abode) live place and State
If nonresident, give place and State	16. Color or A	
10. Color of	race	17. Age at last birthday Yes
race , 11. Age at la	st birthday. 2.3(Years)	
12. Birthplace (city or place)	18. Birthplace (city	ntry)
(State or country)	19. Occupation	11 1
13. Occupation Mucha	weal Engua Nature of Indus	try
Nature of industry		()
20. Number of children of this mother (Taken as of time of birth of child her (Taken as of including this child.)	(a) Born alive and now living(b) Born	alive but now dead(c) Stillborn
(Taken as of time of birth of child.) in certified and including this child.)		AD MIDWIFF.
CERTIFICA		
I hereby certify that I attended to	he birth of this child, who was alive or stillb	Mulan
*When there was no attending phy or midwife, then the father, househ	illhorn >	ysleian or midwife)
or midwife, then the rather, he still etc., should make this return. A still child is one that neither breather shows other evidence of life after	ne nor	ten, was
shows other evidence of the street	((ch 10 , 19)	2 July July 1
II	lov vegt) 1 4 CZ	EL VICED
	Filed V 100 D, 192	County Registra